AMENDMENT TRANSMITTAL LETTER					Docket No. 0020-5490PUS1
Application No. 10/582,174-Conf. #8923		Filing June 8,	i i	Examiner HUANG, G.G	Art Unit
oplicant(s): Keii	chi FUJIWARA	∖ et al.			
vention: A MED	DICAMENT-CO ARTICLE	NTAINING PA	RTICLE AND	) A SOLID PREPAR	ATION CONTAINING
S Amendment ommissioner for O. Box 1450 exandria, VA 223	313-1450				
ransmitted here he fee has beer				• •	
		CLAIM	S AS AMEN	DED	
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	22	- 22 =	0	x 50.00	0.00
Independent Claims	2	- 3 =	0	x 210.00	0.00
Multiple Dependent Claims (check if applicable)  Other fee (please specify): Extension for response within second month  TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					460.00 460.00
X Please charge A duplicate of A check in the Payment by X The Director as described X Credit ar X Charge a	copy of this she ne amount of \$ credit card. Fo is hereby auth below. A dupl ny overpaymen ny additional filin  lo.: 36,623 ART, KOLASCH	eet is enclosed  orm PTO-2038  orized to charg  licate copy of t  it.  ng or application	is enclosed in its attached.  ge and credithis sheet is enclosed in processing for the its enclosed.	Deposit Account No enclosed. Gees required under 37	02-2448